

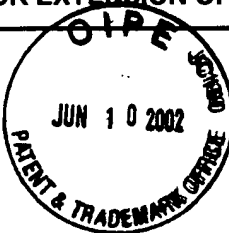
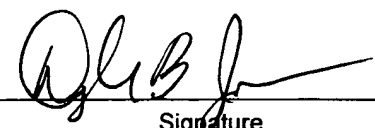
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PTO/SB/22 (10-00)

Approved for use through 10/31/2002. OMB 0651-0031

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PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)		Docket Number (Optional) 22738.00300										
												
In re Application of Seikei Lee, et al												
Application Number 10/042,485	Filed January 8, 2002											
For Network Conferencing System Attendance Authentication Method And Presentation Method												
Group Art Unit Not Known	Examiner Not Known											
<p>This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a response in the above identified application.</p> <p>The requested extension and appropriate non-small-entity fee are as follows (check time period desired):</p> <table style="width: 100%; border: none;"> <tr> <td style="width: 80%;"><input type="checkbox"/> One month (37 CFR 1.17(a)(1))</td> <td style="width: 20%; text-align: right;">\$</td> </tr> <tr> <td><input checked="" type="checkbox"/> Two months (37 CFR 1.17(a)(2))</td> <td style="text-align: right;">\$400.00</td> </tr> <tr> <td><input type="checkbox"/> Three months (37 CFR 1.17(a)(3))</td> <td style="text-align: right;">\$</td> </tr> <tr> <td><input type="checkbox"/> Four months (37 CFR 1.17(a)(4))</td> <td style="text-align: right;">\$</td> </tr> <tr> <td><input type="checkbox"/> Five months (37 CFR 1.17(a)(5))</td> <td style="text-align: right;">\$</td> </tr> </table> <p><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$ _____.</p> <p><input type="checkbox"/> A check in the amount of the fee is enclosed.</p> <p><input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.</p> <p><input type="checkbox"/> The Commissioner has already been authorized to charge fees in this application to a Deposit Account.</p> <p><input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>03-3821</u>.</p> <p>I have enclosed a duplicate copy of this sheet.</p> <p>I am th <input type="checkbox"/> applicant/inventor.</p> <p><input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71</p> <p style="padding-left: 40px;">Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).</p> <p><input checked="" type="checkbox"/> attorney or agent of record.</p> <p><input type="checkbox"/> attorney or agent under 37 CFR 1.34(a).</p> <p style="padding-left: 40px;">Registration number if acting under 37 CFR 1.34(a). <u>39,240</u>.</p> <p>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</p> <div style="display: flex; justify-content: space-between; margin-top: 20px;"> <div style="width: 40%;"> <p style="text-align: center;">June 3, 2002</p> <hr style="width: 80%; margin: 0 auto;"/> <p style="text-align: center;">Date</p> </div> <div style="width: 55%; text-align: center;">  <hr style="width: 80%; margin: 0 auto;"/> <p style="text-align: center;">Signature</p> <p style="text-align: center;">Doyle B. Johnson</p> <hr style="width: 80%; margin: 0 auto;"/> <p style="text-align: center;">Typed or printed name</p> </div> </div>			<input type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$	<input checked="" type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$400.00	<input type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$	<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$	<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$
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<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$											
<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$											
<p>NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.</p> <p><input type="checkbox"/> *Total of _____ forms are submitted.</p>												

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